Case 2190/CM/U\$

## DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

VOLTAGE CONTROLLED OSCILLATOR CIRCUIT FOR A LOW POWER ELECTRONIC DEVICE

e application of which								
图 is attached hereto	OR	was filed			as United Si	tates Application		
		Number or P	Number or PCT International Application Number (Confirmation No. ), and was amended on (if applicable).					
		(Contirmatio						
•					•			
nereby state that I have reviewed and any amendment specifically referre	d understand the d to above.	contents of the abo	ve identified app	olication, incl	uding the cla	ims, as amended		
acknowledge the duty to disclose ontinuation-in-part application(s), made national or PCT international filing	terial informatio	n which became av	ailable between	defined in the filing date	37 CFR 1.5 e of the prio	6, including for r application and		
nereby claim foreign priority benefit	s under 35 U.S.C or 365(a) of any	1.119(a)-(d) or (f), or PCT international	or 365(b) of any application(s) w	foreign application	eation(s) for	patent, inventor?		
	or 365(a) of any sted below and higher this certificate(s)	PCT international ave also identified to	application(s) wo	hich designating the box,	ed at least o any foreign a a filing date l	ne country other application(s) for before that of the		
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I hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.



PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Cas 2190/CM/US

NAME OF SOLE OR FIRST INVENTOR:								
Given Name (first and middle [if any]) David		Family Name or Surname Ruffieux						
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City Belfaux	State	Zip 1782		Country Switzerland				
NAME OF SECOND INVENTOR:								
Given Name (first and middle [if any])		Family Name or Surnan	ne					
Inventor's Signature			Date					
Residence: City	State	Country		Citizenship				
Mailing Address:				<b>.</b>				
City	State	Zip		Country				
NAME OF THIRD INVENTOR:								
Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature			Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip	····	Country				
NAME OF FOURTH INVENTOR:								
Given Name (first and middle (if any))		Family Name or Surname						
Inventor's Signature			Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip	••	Country				
NAME OF FIFTH INVENTOR:								
Given Name (first and middle [if any])	Family Name or Surname							
Inventor's Signature		Date						
Residence: City	State	Country		Citizenship				
Mailing Address:								
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